

FOR DRINKING WATER ONLY

SAMPLES SUBMITTED WITHOUT COLLECTION DATE WILL NOT BE TESTED							
SAMPLE SUBMITTED BY					TELEPHONE NUMBER		
MAILING ADDRESS							
COUNTY	CITY			ST	TATE	ZIP CODE	
SAMPLE COLLECTED BY					DATE COLLECTED		
LOCATION OF SAMPLE COLLECTION			POINT OF SAMPLE COLLEC	TION			
TOWNSHIP: RANGE:	SE	CTION:					
NAME/LOCATION			.1				
ADDRESS							
SUPPLY TYPE							
	☐ NON COMM.	PUBLIC	PUBLIC SUPPLY] отне	ER	
BRIEF DESCRIPTION OF PROBLEM/REASOI	N TESTING BEING F	REQUESTED					
TESTS REQUESTED							
ADDITIONAL COMMENTS							
FOR LABORATORY USE ONL	Υ						
TON EADONATON OSE ONE							
REC	ВУ	REPT	BY .	LOG NO.			